



UNITED STATES ENVIRONMENTAL PROTECTION AGENCY

REGION 2
290 BROADWAY
NEW YORK, NY 10007-1866

JAN 03 2017

CERTIFIED MAIL - RETURN RECEIPT REQUESTED

Article Number: 7016 2070 0001 1397 3553

Ronald Bucciero, General Manager
CNY Regional Transportation Authority
200 Cortland Ave
P.O. Box 820
Syracuse, NY 13205-0820

**Re: Request for Information, Pursuant to Section 308 of the Clean Water Act;
CENTRO Oneida of Rome – EPA Inspection August 18, 2016
SPDES Permit No. NYR00E853
Docket No. CWA-IR-17-012**

Dear Mr. Bucciero:

The purpose of this Request for Information ("RFI") letter is to require you to submit information to the U.S. Environmental Protection Agency ("EPA") regarding the subject facility.

Section 308(a) of the Clean Water Act ("CWA") 33 U.S.C. §1318(a), provides that whenever it is necessary to carry out the objectives of the CWA, including determining whether or not a person/agency is in violation of Section 301 of the CWA, 33 U.S.C. §1311, the EPA shall require the submission of any information reasonably necessary to make such a determination. Under the authority of Section 308 of the Clean Water Act, EPA may require the submission of information necessary to assess the compliance status of any facility and its related appurtenances.

The subject Facility has coverage under the New York State Department of Environmental Conservation's ("NYSDEC's") State Pollutant Discharge Elimination System (SPDES) Multi-Sector General permit (GP-0-12-001) for Stormwater Discharges Associated with Industrial Activity ("MSGP") under SPDES Permit Number NYR00E853.

Within forty-five (45) calendar days of receipt of this RFI letter, submit, in writing, the following:

1. a written response with the actions (including a schedule) that are being taken or will take to address each of the Potential Non-Compliance items and Areas of Concern identified in the enclosed inspection report from EPA's August 18, 2016 Compliance Evaluation Inspection.

CERTIFICATION

All information and documents to be submitted shall be sent by certified mail or its equivalent and shall be signed by an authorized representative of the respective entity (see 40 C.F.R. 122.22), and shall include the following certification:

"I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gathered and evaluated the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations."

to the following addresses:

Justine Modigliani, P.E., Chief, Compliance Section
Division of Enforcement and Compliance Assistance
U.S. Environmental Protection Agency, Region 2
290 Broadway, 20th Floor
New York, New York 10007

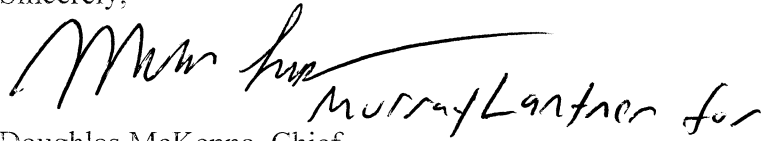
Mr. Joe DiMura, P.E., Director
Bureau of Water Compliance Programs
Division of Water
New York State Department of Environmental Conservation
625 Broadway
Albany, New York 12233-3506

Although the information requested must be submitted to EPA, you are entitled to assert a business confidentiality claim pursuant to the regulations set forth in 40 C.F.R. Part 2, Subpart B. If EPA determines the information you have designated meets the criteria in 40 C.F.R. §2.208, the information will be disclosed only to the extent and by means of the procedures specified in Subpart B. Unless a confidentiality claim is asserted at the time the requested information is submitted, EPA may make the information available to the public without further notice to you.

Compliance with the provisions of this letter is mandatory. If you do not respond fully and truthfully to this Information Request or adequately justify your failure to do so, you may be subject to enforcement under Section 309 of the Act, 33 U.S.C. §1319, under which injunctive relief and penalties may be sought.

Should you have any questions regarding this request, feel free to contact Mrs. Justine Modigliani, P.E., Chief, Compliance Section at (212) 637-4268.

Sincerely,

A handwritten signature in black ink, appearing to read "Murray/Lanter for". The signature is fluid and cursive, with a long horizontal stroke extending to the right.

Douglas McKenna, Chief
Water Compliance Branch

Enclosure – EPA Inspection Report

cc: Michael J. Bessette, Assistant Mgr. of Maintenance, CENTRO of Oneida
Joe DiMura, P.E. Director, BWC, Div. of Water, NYSDEC Albany
Ryan Waldron, NYSDEC via email
Meredith Streeter, NYSDEC via email



United States Environmental Protection Agency
Washington, D.C. 20460

Water Compliance Inspection Report

Section A: National Data System Coding (i.e., PCS)

Transaction Code	NPDES	yr/mo/day	Inspection Type	Inspector	Fac Type
1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5 <input type="checkbox"/> 6 <input type="checkbox"/> 7 <input type="checkbox"/> 8 <input type="checkbox"/> 9 <input type="checkbox"/> 10 <input type="checkbox"/> 11 <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17 <input type="checkbox"/> 18 <input type="checkbox"/> 19 <input type="checkbox"/> 20 <input type="checkbox"/>					
Remarks					
21 <input type="checkbox"/> 22 <input type="checkbox"/> 23 <input type="checkbox"/> 24 <input type="checkbox"/> 25 <input type="checkbox"/> 26 <input type="checkbox"/> 27 <input type="checkbox"/> 28 <input type="checkbox"/> 29 <input type="checkbox"/> 30 <input type="checkbox"/> 31 <input type="checkbox"/> 32 <input type="checkbox"/> 33 <input type="checkbox"/> 34 <input type="checkbox"/> 35 <input type="checkbox"/> 36 <input type="checkbox"/>					
Inspection Work Days	Facility Self-Monitoring Evaluation Rating	BI	QA	Reserved	
67 <input type="checkbox"/> 68 <input type="checkbox"/> 69 <input type="checkbox"/> 70 <input type="checkbox"/> 71 <input type="checkbox"/> 72 <input type="checkbox"/> 73 <input type="checkbox"/> 74 <input type="checkbox"/> 75 <input type="checkbox"/> 76 <input type="checkbox"/> 77 <input type="checkbox"/> 78 <input type="checkbox"/> 79 <input type="checkbox"/> 80 <input type="checkbox"/>					

Section B: Facility Data

Name and Location of Facility Inspected (For industrial users discharging to POTW, also include POTW name and NPDES permit number)	Entry Time/Date	Permit Effective Date
CENTRO of Oneida at Rome 136 Race Street, Rome, NY, 13440	11:15 AM	GP12-001, 10/1/12
	Exit Time/Date	Permit Expiration Date
	2:15 PM	9/30/2017
Name(s) of On-Site Representative(s)/Title(s)/Phone and Fax Number(s)	Other Facility Data (e.g., SIC NAICS, and other descriptive information)	
Larry Calenzo, Utility Tech Michael J. Bessette, Assistant Mgr. of Maintenance, CENTRO of Oneida (315)801-5160, (315) 877-5080 (cell), mbessette@centro.org, 185 Leland Ave., Utica, NY 13502	Lat 43.202987° Lon -75.449638°	
Name, Address of Responsible Official/Title/Phone and Fax Number	Contacted	
Ronald Bucciero, General Mgr., CENTRO, NY, 200 Cortland Ave., P.O. Box 820, Syracuse NY, 13205-0820	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

Section C: Areas Evaluated During Inspection (Check only those areas evaluated)

<input checked="" type="checkbox"/> Permit	<input checked="" type="checkbox"/> Self-Monitoring Program	<input type="checkbox"/> Pretreatment	<input type="checkbox"/> MS4
<input checked="" type="checkbox"/> Records/Reports	<input type="checkbox"/> Compliance Schedules	<input type="checkbox"/> Pollution Prevention	
<input checked="" type="checkbox"/> Facility Site Review	<input type="checkbox"/> Laboratory	<input checked="" type="checkbox"/> Storm Water	
<input checked="" type="checkbox"/> Effluent/Receiving Waters	<input checked="" type="checkbox"/> Operations & Maintenance	<input type="checkbox"/> Combined Sewer Overflow	
<input type="checkbox"/> Flow Measurement	<input checked="" type="checkbox"/> Sludge Handling/Disposal	<input type="checkbox"/> Sanitary Sewer Overflow	

Section D: Summary of Findings/Comments

(Attach additional sheets of narrative and checklists, including Single Event Violation codes, as necessary)

SEV Codes	SEV Description	
<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>		
<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>		
<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>		
<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>		
Name(s) and Signature(s) of Inspector(s)	Agency/Office/Phone and Fax Numbers	Date
Murray Lantner, Env. Eng.	EPA/DECAWCB/ (212) -637-3976	12/21/16
Signature of Management Q A Reviewer	Agency/Office/Phone and Fax Numbers	Date
Justine Modigliani, P.E., Chief, Compliance Section	EPA/DECA-WCB/ (212) -637-4268	12/30/16

INSTRUCTIONS

Section A: National Data System Coding (*i.e.*, PCS)

Column 1: Transaction Code: Use N, C, or D for New, Change, or Delete. All inspections will be *new* unless there is an error in the data entered.

Columns 3-11: NPDES Permit No. Enter the facility's NPDES permit number - third character in permit number indicates permit type for U=unpermitted, G=general permit, etc.. (*Use the Remarks columns to record the State permit number, if necessary.*)

Columns 12-17: Inspection Date. Insert the date entry was made into the facility. Use the year/month/day format (e.g., 04/10/01 = October 01, 2004).

Column 18: Inspection Type*. Use one of the codes listed below to describe the type of inspection:

A	Performance Audit	U	IU Inspection with Pretreatment Audit	!	Pretreatment Compliance (Oversight)
B	Compliance Biomonitoring	X	Toxics Inspection	@	Follow-up (enforcement)
C	Compliance Evaluation (non-sampling)	Z	Sludge - Biosolids	{	Storm Water-Construction-Sampling
D	Diagnostic	#	Combined Sewer Overflow-Sampling	}	Storm Water-Construction-Non-Sampling
F	Pretreatment (Follow-up)	\$	Combined Sewer Overflow-Non-Sampling	:	Storm Water-Non-Construction-Sampling
G	Pretreatment (Audit)	+	Sanitary Sewer Overflow-Sampling	~	Storm Water-Non-Construction-Non-Sampling
I	Industrial User (IU) Inspection	&	Sanitary Sewer Overflow-Non-Sampling	<	Storm Water-MS4-Sampling
J	Complaints	\	CAFO-Sampling	-	Storm Water-MS4-Non-Sampling
M	Multimedia	=	CAFO-Non-Sampling	>	Storm Water-MS4-Audit
N	Spill	2	IU Sampling Inspection		
O	Compliance Evaluation (Oversight)	3	IU Non-Sampling Inspection		
P	Pretreatment Compliance Inspection	4	IU Toxics Inspection		
R	Reconnaissance	5	IU Sampling Inspection with Pretreatment		
S	Compliance Sampling	6	IU Non-Sampling Inspection with Pretreatment		
		7	IU Toxics with Pretreatment		

Column 19: Inspector Code. Use one of the codes listed below to describe the *lead agency* in the inspection.

A ---	State (Contractor)	O ---	Other Inspectors, Federal/EPA (Specify in Remarks columns)
B ----	EPA (Contractor)	P ---	Other Inspectors, State (Specify in Remarks columns)
E ---	Corps of Engineers	R ---	EPA Regional Inspector
J ---	Joint EPA/State Inspectors—EPA Lead	S ---	State Inspector
L ----	Local Health Department (State)	T ---	Joint State/EPA Inspectors—State lead
N ---	NEIC Inspectors		

Column 20: Facility Type. Use one of the codes below to describe the facility.

- 1 — Municipal. Publicly Owned Treatment Works (POTWs) with 1987 Standard Industrial Code (SIC) 4952.
- 2 — Industrial. Other than municipal, agricultural, and Federal facilities.
- 3 — Agricultural. Facilities classified with 1987 SIC 0111 to 0971.
- 4 — Federal. Facilities identified as Federal by the EPA Regional Office.
- 5 — Oil & Gas. Facilities classified with 1987 SIC 1311 to 1389.

Columns 21-66: Remarks. These columns are reserved for remarks at the discretion of the Region.

Columns 67-69: Inspection Work Days. Estimate the total work effort (to the nearest 0.1 work day), up to 99.9 days, that were used to complete the inspection and submit a QA reviewed report of findings. This estimate includes the accumulative effort of all participating inspectors; any effort for laboratory analyses, testing, and remote sensing; and the billed payroll time for travel and pre and post inspection preparation. This estimate does not require detailed documentation.

Column 70: Facility Evaluation Rating. Use information gathered during the inspection (regardless of inspection type) to evaluate the quality of the facility self-monitoring program. Grade the program using a scale of 1 to 5 with a score of 5 being used for very reliable self-monitoring programs, 3 being satisfactory, and 1 being used for very unreliable programs.

Column 71: Biomonitoring Information. Enter D for static testing. Enter F for flow through testing. Enter N for no biomonitoring.

Column 72: Quality Assurance Data Inspection. Enter Q if the inspection was conducted as followup on quality assurance sample results. Enter N otherwise.

Columns 73-80: These columns are reserved for regionally defined information.

Section B: Facility Data

This section is self-explanatory except for "Other Facility Data," which may include new information not in the permit or PCS (e.g., new outfalls, names of receiving waters, new ownership, other updates to the record, SIC/NAICS Codes, Latitude/Longitude).

Section C: Areas Evaluated During Inspection

Check only those areas evaluated by marking the appropriate box. Use Section D and additional sheets as necessary. Support the findings, as necessary, in a brief narrative report. Use the headings given on the report form (e.g., Permit, Records/Reports) when discussing the areas evaluated during the inspection.

Section D: Summary of Findings/Comments

Briefly summarize the inspection findings. This summary should abstract the pertinent inspection findings, not replace the narrative report. Reference a list of attachments, such as completed checklists taken from the NPDES Compliance Inspection Manuals and pretreatment guidance documents, including effluent data when sampling has been done. Use extra sheets as necessary.

*Footnote: In addition to the inspection types listed above under column 18, a state may continue to use the following wet weather and CAFO inspection types until the state is brought into ICIS-NPDES: K: CAFO, V: SSO, Y: CSO, W: Storm Water 9: MS4. States may also use the new wet weather, CAFO and MS4 inspections types shown in column 18 of this form. The EPA regions are required to use the new wet weather, CAFO, and MS4 inspection types for inspections with an inspection date (DTIN) on or after July 1, 2005.

SUMMARY OF FINDINGS

Facility: CENTRO Oneida of Rome, NYR00E853

Inspection Date: August 18, 2016

Inspector: Murray Lantner, Environmental Engineer, USEPA Region 2, DECA-WCB

Murray Lantner
12/27/16

I. INTRODUCTION

On August 18, 2016, the United States Environmental Protection Agency ("EPA") conducted a Compliance Evaluation Inspection ("CEI" or "Inspection") at the CENTRO Oneida of Rome bus maintenance facility at 136 Race Street in Rome, New York ("Facility" or "Site"). The objective of this visit was to determine compliance with NYSDEC State Pollutant Discharge Elimination System (SPDES) Multi-Sector General permit (GP-0-12-001) for Stormwater Discharges Associated with Industrial Activity ("MSGP"). The Facility maintains coverage under the MSGP Permit No. NYR00E853. The Facility's Notice of Intent ("NOI") indicates that it is a Sector P – Land Transportation facility which was confirmed by this inspection. The stormwater discharges from the facility discharge into the Mohawk River approximately 500' from the Facility. The CENTRO facility is adjacent to the Rome Department of Public Works Facility and was said to be situated on land owned by the City of Rome. The Facility representatives indicated that approximately 2 buses and 4 smaller vans are maintained at this Facility. Just hours prior to the inspection there was a heavy rainfall in Rome, NY.

II. FINDINGS & OBSERVATIONS

Upon entering the site, EPA inspector Murray Lantner presented credentials to Mr. Larry Calenzo, Utility Technician with CENTRO. Within a short period of time (about 30 minutes), Mr. Michael J. Bessette, Assistant Manager of Maintenance from the Oneida County facility in Utica, NY came and represented the Facility for the remainder of the inspection. EPA requested to review the onsite paperwork including the Stormwater Pollution Prevention Plan ("SWPPP"), Site Inspection records, and Monitoring and Sampling reports and conducted a walkthrough of the facility.

The following potential noncompliance items were identified at the time of the CEI:

A. Potential Noncompliance Items

1. Part I.F of the MSGP requires that an existing permittee file an NOI and develop a Storm Water Pollution Prevention Plan ("SWPPP") based on the 2012 MSGP on or about December 28, 2012. CENTRO Oneida of Rome had a 2010 SWPPP but did not have a more recent SWPPP as required by part I.F.4 of the MSGP.
2. NYSDEC sent a Notice of Violation dated February 25, 2016 to CENTRO for its failure to submit a discharge monitoring report (See Att. 3) in the 4th Quarter 2015 as required by Part IV.B.1.g of the MSGP – which specifies quarterly monitoring for specific

parameters discharging to an impaired waterbody. Please provide the DMR for the 4th quarter of 2015 and accompanying laboratory report.

B. Areas of Concern

1. Part III.B.7 of the Permit requires that the owner/operator must select, design, install, and implement BMPs as specified in Part I.B.1.a. and Part VIII to meet the benchmarks included in Part VIII of the MSGP. The facility has exceeded the benchmarks for Chemical Oxygen Demand (“COD”) and for one Oil and Grease sample. The facility must determine the cause of these COD benchmark exceedances, modify the SWPPP and implement BMPs to reduce the identified Chemical Oxygen Demand concentrations below the benchmark concentrations as required by the corrective action while following the proper protocol outlined in Corrective and Follow Up Actions in Part IV.B.1.g.(6) of the Permit.

CENTRO of Rome - Table of Benchmark Exceedances 2014 to Mid 2016				
Date	Parameter	Units	Benchmark Value	Reported Level
9/25/2014	Chemical Oxygen Demand [COD]	mg/L	120	190
4/24/2014	Oil & Grease	mg/L	15	20
4/24/2014	Chemical Oxygen Demand [COD]	mg/L	120	124
4/8/2015	Chemical Oxygen Demand [COD]	mg/L	120	124
2/5/2016	Chemical Oxygen Demand [COD]	mg/L	120	124
3/22/2016	Chemical Oxygen Demand [COD]	mg/L	120	3590

2. As shown in the above table the Facility reported identical COD concentrations in 2014, 2015, and 2016 please provide the lab reports for each of these COD sample results of 124 mg/l.
3. NYSDEC sent a reminder letter dated May 5, 2016 (Attachment 2) to indicate that a resample for Chemical Oxygen Demand was necessary based on the benchmark exceedance reported in the annual report for 2016. Please provide the DMRs and accompanying laboratory reports for 2016.

C. Other

1. The majority of the Facility’s industrial activities are conducted indoors except for activities such as the transfer of used oil to a truck. The Facility may want to investigate whether, with some small modifications, it can meet the conditions for No Exposure. See NYSDEC’s web site for information on No Exposure. <http://www.dec.ny.gov/chemical/62833.html>
2. The Facility had training records from 2015, presented by C&S Engineers.

3. As shown in photo 659 and 660 monthly site inspections are included in the Facility's Computerized Maintenance System

III. CLOSING

A closing conference was held with Mr. Bessette explaining EPA findings identified at the time of the CEI and any additional questions were answered at that time.

IV. ATTACHMENTS

Attachment 1 – Photographs

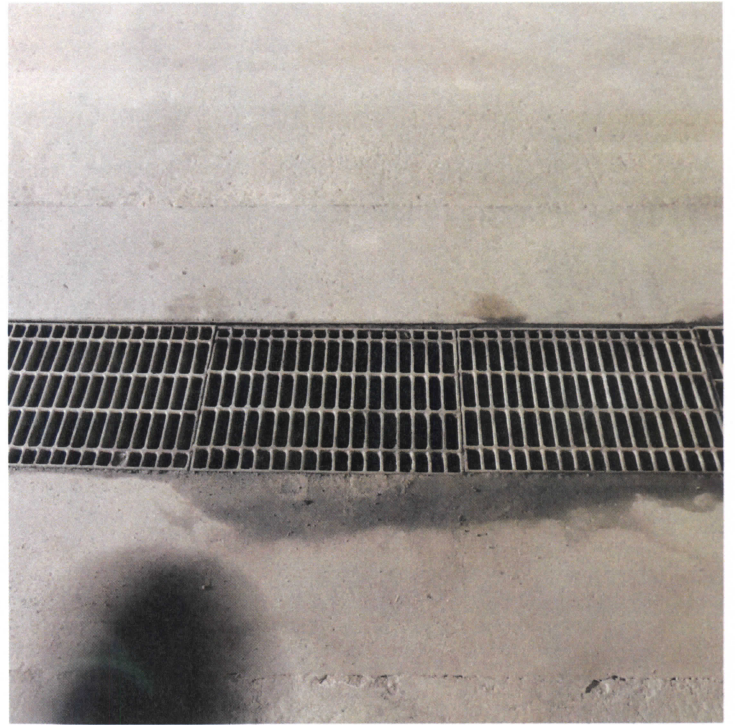
Attachment 2 – NYSDEC May 5, 2016 resample letter

Attachment 3 – NYSDEC 2/25/16 NOV

Attachment 1 - CENTRO Oneida of Rome, Rome NY, NYR00E853,
Unedited Photographs
Taken on August 18, 2016 by Murray Lantner, P.E. Env. Eng.
Nikon Coolpix P510 Digital Camera



DSCN3648 – Entrance to CENTRO Oneida of Rome



DSCN3649 – Trench Drain



DSCN3650 – Inside Vehicle Maintenance Facility



DSCN3651 – Parts Cleaner at Facility



DSCN3652 – Stormwater Catch Basin



DSCN3653 – Sanitary Sewer Manhole in front of the facility.



DSCN3654 – Sanitary Sewer Manhole – NE side of Facility



DSCN3655 – Sanitary Sewer Manhole – NE Part of Facility

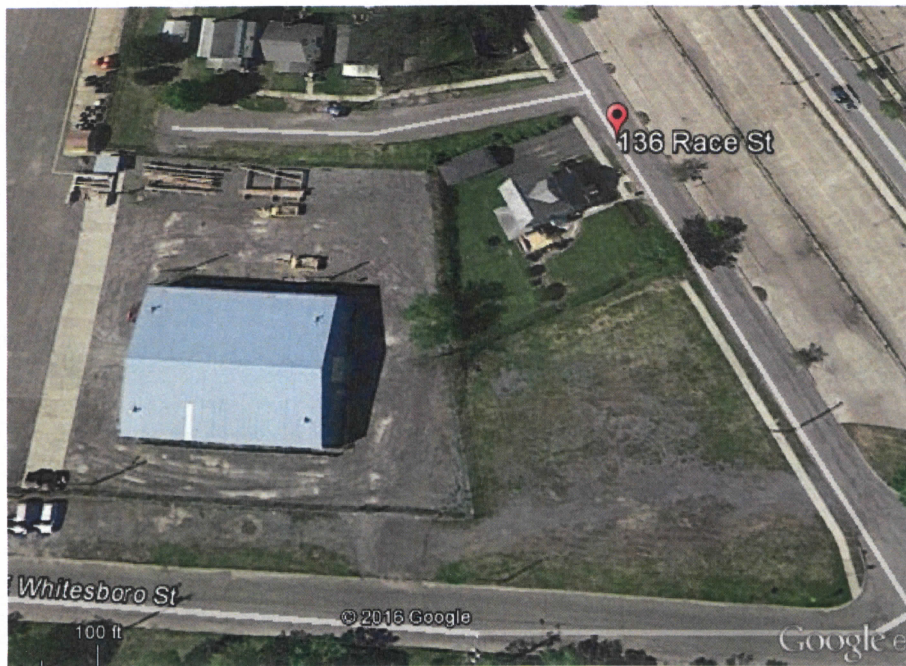


DSCN3656 – Sanitary Sewer Manhole outside of facility.



DSCN3657 – Sanitary Sewer Manhole outside facility.

Google Earth Pro Aerial Image of the CENTRO Oneida of Rome Facility at 136 Race Street



Att. 2

NEW YORK STATE DEPARTMENT OF ENVIRONMENTAL CONSERVATION

Division of Water, Bureau of Water Compliance
625 Broadway, Albany, New York 12233-3506
P: (518) 402-8177 | F: (518) 402-8082
www.dec.ny.gov

May 5, 2016

CNY REGIONAL TRANSPORTATION AUTHORITY
200 CORTLAND AVE, PO BOX 820
SYRACUSE, NY 13205-0820

Re: **REMINDER TO SUBMIT CORRECTIVE ACTION FORM**
FACILITY: CENTRO OF ONEIDA @ ROME
SPDES ID: **NYR00E853**

Dear Permittee:

You submitted a Notice of Intent (NOI) to the Department to gain coverage under New York's State Pollutant Discharge Elimination System (SPDES) Multi-Sector General Permit for Stormwater Discharges Associated with Industrial Activities (GP-0-12-001)(general permit). The facility, CENTRO OF ONEIDA @ ROME, 136 RACE ST, ROME, is now operating under the general permit and needs to comply with the terms and conditions of the permit.

According to Part IV.B.1.c.(6) and Part IV.B.1.e.(5) of the general permit, if the results of one or more parameters exceeds the applicable benchmark or effluent limitation, the owner or operator must report to the Department on a Corrective Action Form, the results of the exceedance(s), corrective action(s) taken and the results of a follow-up sample.

A follow-up stormwater sample must be collected between January 1st and June 30th, 2016. The sample needs to be taken from the same outfall(s) where the exceedance(s) occurred; this includes any outfalls not tested the previous year because of the use of the representative outfall waiver (Example: you sampled outfall 001 and claimed it represented the discharge at outfall 002. You must sample and analyze the exceeded parameter(s) at both outfalls 001 and 002). Complete laboratory analysis for the pollutant(s) that exceeded the limit(s) must be conducted. This sample collection and analysis is in addition to the sample collection required for the annual compliance sampling. Please consult the applicable section of the permit for more information on this requirement. A copy of the permit is located on the Department website at the following link: http://www.dec.ny.gov/docs/water_pdf/gp12001.pdf



Department of
Environmental
Conservation

If corrective actions do not result in achieving benchmark monitoring cut-off concentrations and/or effluent limitation guidelines, the facility must continue its efforts to implement additional best management practices (BMPs) to reduce the pollutant being discharged from the property. Continued exceedance of benchmark cut-off concentrations and/or effluent limitations guidelines may identify facilities that would be more appropriately covered under an individual SPDES permit.

The DMR you submitted to the Department for the annual monitoring period ending December 31st, 2015, indicated exceedance(s) of the benchmark and/or effluent limitation(s) for the following outfall(s) and parameter(s):

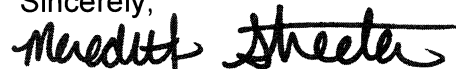
Outfall 001 - Chemical Oxygen Demand [COD]

The Corrective Action Form, with the results from follow-up sampling, is due to the Department by July 31st, 2016. Failure to submit the Corrective Action Form to the Department and/or take the necessary corrective actions, are violations of your SPDES permit and Article 17 of the New York State Environmental Conservation Law (ECL) and could result in civil penalties.

A copy of the Corrective Action Form is enclosed. It is located on the DEC website at the following link: http://www.dec.ny.gov/docs/water_pdf/msgpcaf.pdf. Please note that this form also serves as the Report of Non-Compliance Event form.

If you have any questions regarding this matter or need assistance in completing the Corrective Action Form, please contact Holly Shear at 518-402-8175 or by email at holly.shear@dec.ny.gov.

Sincerely,

A handwritten signature in black ink that reads "Meredith Streeter". The signature is fluid and cursive, with the first name "Meredith" and last name "Streeter" clearly distinguishable.

Meredith Streeter, P.E.
Bureau of Water Compliance

Cc: RWE

AH.3

NEW YORK STATE DEPARTMENT OF ENVIRONMENTAL CONSERVATION

Division of Water, Bureau of Water Compliance
625 Broadway, Albany, New York 12233-3506
P: (518) 402-8177 | F: (518) 402-8082
www.dec.ny.gov

February 25, 2016

CNY REGIONAL TRANSPORTATION AUTHORITY
200 CORTLAND AVE, PO BOX 820
SYRACUSE, NY 13205-0820

**Re: NOTICE OF VIOLATION FOR FAILURE TO SUBMIT DISCHARGE
MONITORING REPORT (DMR)**

FACILITY: CENTRO OF ONEIDA @ ROME
SPDES ID: **NYR00E853**

Dear Permittee:

You submitted a Notice of Intent (NOI) form to this Department to gain authorization to discharge stormwater from your industrial facility CENTRO OF ONEIDA @ ROME, 136 RACE ST, ROME to the waters of the State. Having submitted your NOI, you are operating under New York's State Pollutant Discharge Elimination System (SPDES) Multi-Sector General Permit for Stormwater Discharges Associated with Industrial Activities (GP-0-12-001) and are therefore bound to comply with the terms and conditions of the permit.

Pursuant to Part IV.B.1.g of the general permit, if a facility discharges to an impaired waterbody and the cause of the impairment is a pollutant of concern included in the benchmarks and/or effluent limitations to which the facility is subject to in Part VIII, the facility is also required to conduct quarterly sampling for that particular pollutant(s) only. You indicated on your NOI in questions 6(a) and 6(b) that your facility is subject to this additional monitoring requirement. The quarterly Discharge Monitoring Report(s) (DMR(s)) for the monitoring period ending 12/31/2015 was due to the Department by 1/28/16. As of the date of this letter, the DMR(s) for the following outfall(s) and/or limit set(s) has not been received or is incomplete for this quarter (10/1/2015 – 12/31/2015) of 2015:

001Q

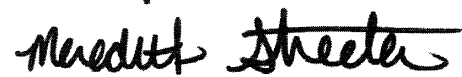
Failure to submit a required DMR is a violation of your SPDES permit and Article 17 of the New York State Environmental Conservation Law (ECL). ECL §71-1929 provides for civil penalties of up to thirty-seven thousand five-hundred dollars (\$37,500) per day per violation. **You must complete the attached page and return it along with any required DMRs within 30 days of the date of this letter.**



Department of
Environmental
Conservation

If you have any questions regarding this matter, need a copy of your blank DMR or need assistance in completing the DMR, contact Holly Shear at 518-402-8175.

Sincerely,

A handwritten signature in black ink that reads "Meredith Streeter". The signature is written in a cursive, flowing style with a horizontal line extending from the end of the last name.

Meredith Streeter, P.E.
Bureau of Water Compliance

Cc: RWE

Mail a copy of both sides of this letter and any attachments to: MSGP Permit Coordinator, NYSDEC Division of Water, 625 Broadway - 4th Floor, Albany, New York 12233-3506.

Retain a copy of this letter and any attachments you enclose for your records.

Check and complete all appropriate items below in:

- ☐ **The DMR(s) was/were sent to NYSDEC Albany Office on the following date(s):** _____; **and I have attached to this letter a copy(ies) of the DMR(s) with an original signature.**
- ☐ **The DMR(s) was/were not sent to NYSDEC. Attached are the required DMR(s) with original signature.** (Blank DMR forms may be requested by calling Meredith Streeter at 518-402-8213.)
- ☐ **A sample was not taken this quarter. I did not collect a stormwater sample because:**
- ☐ **The owner/operator mailing address, as identified in the Notice of Intent, is no longer valid. I have submitted a Notice of Modification to correct this address.**
- ☐ **The DMR mailing address is incorrect. I have submitted a Notice of Modification to correct this address.**
- ☐ **I am no longer required to submit DMRs because:**

(Please attach any supporting documentation. For permit modification, permittee transfer or facility discontinuation, please contact Ryan Waldron at 518-402-8244 for additional paperwork.)

Your Name: _____

Title: _____

Company: _____

Signature: _____

Date: _____